

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street) ▼

2400 N St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20037-1153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375360

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carlton G. Davids

Signature of Treasurer

Carlton G. Davids

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
12 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		36524.80
(b) Cash on Hand at Beginning of Reporting Period.....	69952.26	
(c) Total Receipts (from Line 19)	41502.34	374209.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	111454.60	410734.05
7. Total Disbursements (from Line 31)	39860.21	339139.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71594.39	71594.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

37232.20

313819.13

(ii) Unitemized

3620.01

49080.59

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

40852.21

362899.72

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

40852.21

362899.72

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

650.13

11309.53

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

41502.34

374209.25

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

41502.34

374209.25

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	760.21	11363.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	760.21	11363.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38000.00	326200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1100.00	1576.66
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1100.00	1576.66
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	39860.21	339139.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39860.21	339139.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	40852.21	362899.72
34. Total Contribution Refunds (from Line 28(d))	1100.00	1576.66
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39752.21	361323.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	760.21	11363.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	650.13	11309.53
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	110.08	53.47

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joydev Acharya F.A.C.C.Mailing Address 2416 Frans Hals Cir
Ste 230

City	State	Zip Code
Modesto	CA	95356-0373

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stanislaus CardiologyOccupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : 024730B869A5DEC8FDA

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jesse E. Adams F.A.C.C.Mailing Address 1205 Isleworth Dr
Ste 60

City	State	Zip Code
Louisville	KY	40245-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Louisville CardiologyOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2015

Transaction ID : 4914AFFA2747EFE17DE8

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Oluremi Adesanya F.A.C.C.

Mailing Address 2160 Hedge Gate Blvd

City	State	Zip Code
Beavercreek	OH	45431-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dayton VA Medical CenterOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : 23E45EA4A00AE969435

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1333.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay H. Alexander F.A.C.C.

Mailing Address 2151 Waukegan Rd
Ste 100

City State Zip Code
Bannockburn IL 60015-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Shore Cardiologists, SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 30 2015

Transaction ID : 711A6200F5B9CAB3DA1

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Brad G. Angeja F.A.C.C.

Mailing Address 865 44th Ave

City State Zip Code
San Francisco CA 94121-3307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palo Alto Medical Foundation

Occupation

NON-INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 16 2015

Transaction ID : 42C9BC9FF4BAB6E282FA

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Nizar A. Assi F.A.C.C.

Mailing Address 10012 Kennerly Rd
Ste 301

City State Zip Code
Saint Louis MO 63128-2197

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gateway Cardiology, PC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 25 2015

Transaction ID : 4BBC9E909BD2F1F26518

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

1551.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alfred A. Bove PHD, M.A.C

Mailing Address 3401 N Broad St

Parkinson Pavilion Suite 920

City

Philadelphia

State

PA

Zip Code

19140-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Temple University Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 25 / 2015

Transaction ID : 40059F04FDFBC831F952

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Lawrence D. Brenner F.A.C.C.

Mailing Address 1202 3rd St

City

Corpus Christi

State

TX

Zip Code

78404-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Corpus Christi Heart Clinic & Vascular

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : 3AA6E08F-C297-4444-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Joseph G. Cacchione F.A.C.C.

Mailing Address 9500 Euclid Ave

Desk J2-3

City

Cleveland

State

OH

Zip Code

44195-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 25 / 2015

Transaction ID : 4C2FA2FF860B82797056

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

475.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter J. Chaille F.A.C.C.

Mailing Address 427 Chestnut Forest Cv

City

Fort Wayne

State

IN

Zip Code

46814-8926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkview Physicians Group, Cardiology

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

12 / 03 / 2015

Transaction ID : 418990793CEDEF8183CB

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. Hollace D. Chastain F.A.C.C.

Mailing Address 4470 Brook Hollow Dr

City

Fort Wayne

State

IN

Zip Code

46814-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 29 / 2015

Transaction ID : 4CE794D4F313FCF5303A

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Richard A. Chazal F.A.C.C.

Mailing Address 671 N Town and River Dr

City

Fort Myers

State

FL

Zip Code

33919-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lee Physician Group-The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 07 / 2015

Transaction ID : 453BA8CAA975094A138C

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rajib Choudhury F.A.C.C.

Mailing Address 4011 Talbot Rd S
FI 5

City	State	Zip Code
Renton	WA	98055-5773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : EC2CBBB5F761D57E61F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Bernard A. Clark F.A.C.C.

Mailing Address 95 Johnny Cake Ln

City	State	Zip Code
Glastonbury	CT	06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2015

Transaction ID : 417EB28FBC17F709448A

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

c. Marc C. Cohen F.A.C.C.

Mailing Address 1445 Huntingdon Rd

City	State	Zip Code
Abington	PA	19001-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : 7A58E7403B339B1615F

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gary Loris Conrad F.A.C.C.

Mailing Address 1224 Arden Rd

City State Zip Code
Pasadena CA 91106-4146

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : FB368A6B543EB58F831

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. George H. Crossley F.A.C.C.

Mailing Address 276 Stratton Pl
Ste 5209

City State Zip Code
Brentwood TN 37027-4228

FEC ID number of contributing federal political committee.

C

Name of Employer

Vanderbilt University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 25 / 2015

Transaction ID : 4BF386C74CD36902E5C5

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Timothy A. Dewhurst F.A.C.C.

Mailing Address 4819 18th Ave SW

City State Zip Code
Seattle WA 98106-1548

FEC ID number of contributing federal political committee.

C

Name of Employer

Group Health

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 46DCAB043ACB142F04CA

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul H. Dillahun F.A.C.C.

Mailing Address 820 Prudential Dr
Ste 112

City State Zip Code
Jacksonville FL 32207-8204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2015

Transaction ID : DA99DB412AE899CDE34

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Gary Dykstra F.A.C.C.

Mailing Address 3110 North Rd

City State Zip Code
Bartlesville OK 74006-4706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : 2574BABB0BB8BECFD61

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Arthur Lee Eberly F.A.C.C.

Mailing Address 202 Chamberlain Ct

City State Zip Code
Greenville SC 29605-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Carolina Cardiology

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.73

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2015

Transaction ID : 4C24B2E2F79D3B4AB4CD

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

833.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 57
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kayvan Ellini F.A.C.C.

Mailing Address 13001 Juniper Canyon Trl NE

City	State	Zip Code
Albuquerque	NM	87111-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer

Presbyterian Heart Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : B75EB13AF2F722C8AAD

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. David M. Evans F.A.C.C.

Mailing Address 130 Ashlei Ln

City	State	Zip Code
Searcy	AR	72143-3024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinic Arkansas

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2015

Transaction ID : 48168D0B17C31D008133

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Andrew Dundee FergusonMailing Address 550 S Landmark Ave
Landmark Medical Center

City	State	Zip Code
Bloomington	IN	47403-3239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Internal Medicine Associates

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : 499EBB52EB5B56E89188

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

370.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ned D. Freeman F.A.C.C.Mailing Address 2 Innovation Dr
Ste 400

City	State	Zip Code
Greenville	SC	29607-5270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Upstate Cardiology, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2015

Transaction ID : 0A045BD7-ED00-49C8-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lance B. Friedland F.A.C.C.

Mailing Address 1010 Chesson Ct

City	State	Zip Code
Alpharetta	GA	30022-7174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : 8304FE9F694DD9F3DD3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Gordon L. Fung F.A.C.C.

Mailing Address 1837 10th Ave

City	State	Zip Code
San Francisco	CA	94122-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF Medical Center at Mt. Zion

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : C81E8F44B21FC1C1B52

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gordon L. Fung F.A.C.C.Mailing Address 1600 Divisadero St
C-244

City	State	Zip Code
San Francisco	CA	94115-3010

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF Medical Center at Mt. Zion

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2015

Transaction ID : 5E72074E-5F84-41CB-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael F. Gilson F.A.C.C.

Mailing Address 100 Prospect St

City	State	Zip Code
Providence	RI	02906-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2015

Transaction ID : 4755B22FE231489D4F49

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Prospero B. Gogo F.A.C.C.Mailing Address 111 Colchester Ave
McClure1Cardiology

City	State	Zip Code
Burlington	VT	05401-1473

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interventional-Univ. of Vermont/Fletch

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : 45358E38A72130C9D92A

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

683.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mitchell M. Greenspan F.A.C.C.

Mailing Address 3 Life Mark Dr

City State Zip Code
 Sellersville PA 18960-1598

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Pennsylvania Cardiology

Occupation
 ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : D8D41CB0223FF46412D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Karanvir S. Grewal F.A.C.C.

Mailing Address 3705 Olentangy River Rd
 Ste 100

City State Zip Code
 Columbus OH 43214-3467

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mid-Ohio Cardiology

Occupation
 ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 07 2015

Transaction ID : 2F441BB3-AA97-4665-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Anuj Gupta F.A.C.C.

Mailing Address 1400 William St

City State Zip Code
 Baltimore MD 21230-4545

FEC ID number of contributing
federal political committee.

C

Name of Employer
 University of Maryland School of Medic

Occupation
 INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 28 2015

Transaction ID : 47AA9F85EBDFC7610DF7

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

791.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas A. Haffey F.A.C.C.Mailing Address 9141 Grant St
Ste 140

City	State	Zip Code
Thornton	CO	80229-4367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

Transaction ID : 4BC7928672F8317504EF

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Thomas A. Haffey F.A.C.C.

Mailing Address 10933 Meade Ct

City	State	Zip Code
Westminster	CO	80031-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : 4048BC7289F01743821E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. John Gordon Harold M.A.C.C.

Mailing Address 2473 Jupiter Dr

City	State	Zip Code
Los Angeles	CA	90046-1752

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars-Sinai Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : 448D94F49D29DF0F25A0

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

375.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill H. Harris F.A.C.C.

Mailing Address 107 Primrose Ln

City

Pikeville

State

KY

Zip Code

41501-3986

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pikeville Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2015			

Transaction ID : 52BB2493597D3676D05

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. David R. Holmes M.A.C.C.Mailing Address 200 1st St SW
Smh MG4-523

City

Rochester

State

MN

Zip Code

55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			25			2015			

Transaction ID : 43A9B81AB2361254D212

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Michael B. Honan F.A.C.C.

Mailing Address 3980 Colonnade Pkwy

City

Birmingham

State

AL

Zip Code

35243-2382

FEC ID number of contributing
federal political committee.

C

Name of Employer

CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2015			

Transaction ID : 1B8CD53C4FD4E62011E

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1333.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel J. Humiston F.A.C.C.Mailing Address 2132 N 1700 W
Ste 200

City	State	Zip Code
Layton	UT	84041-7060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah Cardiology, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : 44F3BF5BF52A7A2280B5

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. David G. Ike F.A.C.C.

Mailing Address 1012 Four Mile Branch Rd

City	State	Zip Code
Spartanburg	SC	29302-4411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : 31C95573C3F5AA18DE7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Anand M. Irimpen F.A.C.C.

Mailing Address 243 Hollywood Dr

City	State	Zip Code
Metairie	LA	70005-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tulane University School of Medicine

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : DC8D21245EBFF598F4F

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

708.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Saji C. Jacob F.A.C.C.

Mailing Address 5116 Lake Crest Cir

City

Hoover

State

AL

Zip Code

35226-5027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Associates of the South

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	04	/	2015

Transaction ID : 4FAFAE33539A88EDC4AA

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Timothy D. Jacobson

Mailing Address 2629 NE 23rd Ave

City

Portland

State

OR

Zip Code

97212-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : 47C98E729F6955F80DA0

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

c. Oscar R. Jenkins F.A.C.C.

Mailing Address 122 Braeside Cir

City

Asheville

State

NC

Zip Code

28803-3378

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asheville Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : D6EBC7BEA767861C947

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1045.83

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 57
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard A. Josephson F.A.C.C.Mailing Address Harrington Heart and Vascular Inst
Case Medical Center

City	State	Zip Code
Cleveland	OH	44106-5038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harrington Heart & Vascular Institute,

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2015

Transaction ID : 1769DC4D-673E-436D-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Hari Joshi

Mailing Address 6841 Stella Cir

City	State	Zip Code
Coopersburg	PA	18036-9738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lehigh Valley Cardiology Associates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2015

Transaction ID : 1D7FEDAC8FD53CDF567

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Edo Kaluski F.A.C.C.Mailing Address 185 S Orange Ave
Msb Room I538

City	State	Zip Code
Newark	NJ	07103-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : 4CC71F4A0753298B9C9

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anna M. Kalynych F.A.C.C.

Mailing Address 58 Montclair Dr NE

City State Zip Code
Atlanta GA 30309-1527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Piedmont Heart Institute

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2015

Transaction ID : 3EFB6B026D31B05E13C

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jerry D. Kennett M.A.C.C.

Mailing Address 4614 Copperstone Ct

City State Zip Code
Columbia MO 65203-1696

FEC ID number of contributing
federal political committee.

C

Name of Employer
Missouri Cardiovascular Specialists

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 30 2015

Transaction ID : 0F9DA8AB171825E3A90

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

c. Steven E. Kornberg F.A.C.C.

Mailing Address 155 Medical Center Way
FI 2

City State Zip Code
Somers Point NJ 08244-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Penn Cardiology Somers Point

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M / D D / Y Y Y Y Y
12 18 2015

Transaction ID : 4BA082D0A2C4149C8865

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2541.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Smadar Kort F.A.C.C.

Mailing Address 65 Mimosa Dr

City State Zip Code
Roslyn NY 11576-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stony Brook University Medical Center

Occupation
ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.38

Date of Receipt

M M / D D / Y Y Y Y Y
12 24 2015

Transaction ID : 4D83ACE6EDFECB2A616E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Fred M. Krainin F.A.C.C.

Mailing Address 3817 Cherrywood Rd

City State Zip Code
Florence SC 29501-9209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pee Dee Cardiology Associates

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2015

Transaction ID : 06CA6FCCE208E3A1E82

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Karla Marie Kurrelmeyer F.A.C.C.

Mailing Address 6550 Fannin St
Ste 1901

City State Zip Code
Houston TX 77030-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Methodist DeBakey Heart Center

Occupation
ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 14 2015

Transaction ID : 99427658-1830-427E-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1583.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher Learn F.A.C.C.

Mailing Address 1418 Race St

Unit 1

City

Cincinnati

State

OH

Zip Code

45202-7050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cincinnati Children's Medical Center

Occupation

ADULT CONGENITAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2015			

Transaction ID : 41FEB0AFE8E3FAC7BE66

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Gilbert A. Leidig F.A.C.C.

Mailing Address 1 Centurian Dr

Ste 200

City

Newark

State

DE

Zip Code

19713-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Physicians, P.A.Abby Medica

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			26			2015			

Transaction ID : 4AA391E8CFA1A48E027E

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Norman E. Lepor F.A.C.C.

Mailing Address 99 N La Cienega Blvd

Ste 203

City

Beverly Hills

State

CA

Zip Code

90211-2285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Transaction ID : 4E55AD7F3F4F6D40E570

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

133.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steve Leung F.A.C.C.

Mailing Address 3749 Horsemint Trl

Court Wethington Room 324

City

Lexington

State

KY

Zip Code

40509-2947

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Kentucky

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : 4CC39E2F6DB67113EE17

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Thomas J. Lewandowski F.A.C.C.

Mailing Address 113 Limekiln Dr

City

Neenah

State

WI

Zip Code

54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 4D2DBB0876D88291F67D

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

C. Sandra J. Lewis F.A.C.C.

Mailing Address 5342 SW Hewett Blvd

City

Portland

State

OR

Zip Code

97221-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Cardiovascular Institute

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1031.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 4FFEB8A68BAD51CE8EDB

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sunil V. Mankad F.A.C.C.

Mailing Address 200 1st St SW

Gonda 5 South Room 5-209

City

Rochester

State

MN

Zip Code

55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 12 / 2015

Transaction ID : 4E0FB4C93ED9A52E9B92

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. J. Jeffrey Marshall F.A.C.C.

Mailing Address 200 S Enota Dr NE

Ste 200

City

Gainesville

State

GA

Zip Code

30501-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

12 / 07 / 2015

Transaction ID : 44F0BC17582CAFFB44B0

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Gregory J. Mazanek F.A.C.C.

Mailing Address 10590 N Meridian St

City

Indianapolis

State

IN

Zip Code

46290-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2015

Transaction ID : 3DE64EA5863E7322A9E

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

791.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Laxmi S. Mehta F.A.C.C.Mailing Address 5037 Canterbury Dr
Ste 200

City	State	Zip Code
Powell	OH	43065-8615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio State University

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : 445F96B9B97F97A7FAB6

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Michael Joseph Mirro F.A.C.C.

Mailing Address 2005 Prestwick Ln

City	State	Zip Code
Fort Wayne	IN	46814-9317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkview Health System

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : 97853C2457692522D4D

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. David C. Mishkel F.A.C.C.Mailing Address 1599 NW 9th Ave
Ste 203

City	State	Zip Code
Boca Raton	FL	33486-1310

FEC ID number of contributing
federal political committee.

C

Name of Employer

David C. Mishkel, MD, PA

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

Transaction ID : 487DABEBAE9819249EFB

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

1103.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alberto E. Montalvo F.A.C.C.

Mailing Address 5928 Riverview Blvd

City

Bradenton

State

FL

Zip Code

34209-1859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bradenton Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : 417B8B7CF57D87D96E7A

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Marc A. Mugmon F.A.C.C.

Mailing Address 7193 Collingwood Ct

City

Elkridge

State

MD

Zip Code

21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2015

Transaction ID : 4BD597DE731CA06F8F1E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Jane W. Newburger MPH, F.A.C.

Mailing Address 300 Longwood Ave

City

Boston

State

MA

Zip Code

02115-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Hospital Boston, Department

Occupation

PEDIATRIC CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2015

Transaction ID : F06A8346-17BD-4D55-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John V. Olsen F.A.C.C.Mailing Address 550 17th Ave
Ste 680City State Zip Code
Seattle WA 98122-5795FEC ID number of contributing
federal political committee.

C

Name of Employer
Swedish Heart and Vascular ClinicOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : 6BF13224DF58F0366B6

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kathleen A. Pavaglio F.A.C.C.Mailing Address 3230 Waring Ct
Ste 0City State Zip Code
Oceanside CA 92056-4509FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : 556A22E0ADBBAB79D46

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. William H. Pentz F.A.C.C.Mailing Address 230 W Washington Sq
Fl 3City State Zip Code
Philadelphia PA 19106-3500FEC ID number of contributing
federal political committee.

C

Name of Employer
Penn Cardiology At Pennsylvania HospitOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

Transaction ID : 4D54902163809EC139C2

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

440.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Neal S. Perlmuter F.A.C.C.

Mailing Address 7002 126th Ave NE

City State Zip Code
Kirkland WA 98033-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 4178A839F0A5322E3A0A

Amount of Each Receipt this Period

41.68

Full Name (Last, First, Middle Initial)

B. Joel M. Phares F.A.C.C.

Mailing Address 5516 Hawks Landing Dr
Ste 401

City State Zip Code
Arrington TN 37014-9135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vanderbilt Heart and Vascular Institut

INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A7DA2736E1CDF54E62E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Matthew Phillips F.A.C.C.

Mailing Address 12721 Monte Castillo Pkwy

City State Zip Code
Austin TX 78732-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Austin Heart, P.A.

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 40A885657495E644A97D

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

625.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matthew Phillips F.A.C.C.

Mailing Address 12721 Monte Castillo Pkwy

City

Austin

State

TX

Zip Code

78732-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Austin Heart, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2015			

Transaction ID : 43EBB727369CFF9A40E5

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Matthew Phillips F.A.C.C.

Mailing Address 12721 Monte Castillo Pkwy

City

Austin

State

TX

Zip Code

78732-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Austin Heart, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Transaction ID : 4CBD9C53D803252BF575

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. John W. Pickrell F.A.C.C.

Mailing Address 1230 E 1st St

City

Casper

State

WY

Zip Code

82601-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2015			

Transaction ID : 423481A474FDB78C138F

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

251.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 57

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James B. Powers F.A.C.C.

Mailing Address 11 Bowdoin Dr

City
Falmouth

State
ME

Zip Code
04105-2557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : 42D19D3F415FB89E9E8B

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Marshall F. Priest F.A.C.C.

Mailing Address 190 E Bannock St
Heart Administration

City
Boise

State
ID

Zip Code
83712-6241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Idaho Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : 1CE37C52BEA546E79BF

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Geetha Raghuveer F.A.C.C.

Mailing Address 5354 Mission Woods Rd

City
Shawnee Mission

State
KS

Zip Code
66205-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Mercy Hospital

Occupation

PEDIATRIC CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 4347BB17FF7D3C9CCE71

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

808.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 57
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott J. Ratner F.A.C.C.

Mailing Address 407 Franklin Ave

City

Franklin Square

State

NY

Zip Code

11010-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : 5F1FC5F6-0C49-463B-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mary D. Restifo F.A.C.C.

Mailing Address 5729 MacArthur Blvd NW

City

Washington

State

DC

Zip Code

20016-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : FB170168FAB6AF701EE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. George P. Rodgers F.A.C.C.

Mailing Address 2441 Westlake Dr

City

Austin

State

TX

Zip Code

78746-2950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Seton Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

Transaction ID : 47F681F158FAAD0FA0E3

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Orlando Rodriguez-Vila F.A.C.C.

Mailing Address 265 Calle Jiguero

City

San Juan

State

PR

Zip Code

00926-7109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Assistant Chief, Medical Service, Cath

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			01			2015					

Transaction ID : 40449C1AF1EDB24FA7D0

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. David A. Rosenbaum F.A.C.C.Mailing Address 1400 E Boulder St
700

City

Colorado Springs

State

CO

Zip Code

80909-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer

UC Health Cardiology

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			07			2015					

Transaction ID : 471AAD88A75A902264CA

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Robert L. Rothbard F.A.C.C.

Mailing Address 2000 Via Tuscany

City

Winter Park

State

FL

Zip Code

32789-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			25			2015					

Transaction ID : 4E90BBEA5A5D2D6E4DC2

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

191.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John S. Rumsfeld PHD, F.A.C

Mailing Address 130 S Cherry St

City

Denver

State

CO

Zip Code

80246-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 25 / 2015

Transaction ID : 4305AA5EC5458CE3308B

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Sirumugai M. Saravanan F.A.C.C.

Mailing Address 3344 Dubois St

City

West Lafayette

State

IN

Zip Code

47906-1199

FEC ID number of contributing
federal political committee.

C

Name of Employer

IU Arnett Health

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2015

Transaction ID : 89ABD7A6286CED1360B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Paul D. Sarkaria F.A.C.C.

Mailing Address 3230 Waring Ct

Ste O

City

Oceanside

State

CA

Zip Code

92056-4509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 14 / 2015

Transaction ID : 98AC7F313AD5E9F796B

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

583.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 57
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay D. Schlaifer F.A.C.C.

Mailing Address 701 Kossuth St

City

Lafayette

State

IN

Zip Code

47905-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2015

Transaction ID : 755022520C90079F9F3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael K. Schroyer A.A.C.C.,

Mailing Address 9065 Pebblepointe Cir

City

Zionsville

State

IN

Zip Code

46077-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Vincent Heart Center of Indiana

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2015

Transaction ID : 4EF892C54C9AFE869DA2

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Timothy J. Shanahan F.A.C.C.

Mailing Address 6177 Country Club Dr

City

Easton

State

MD

Zip Code

21601-8567

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2015

Transaction ID : 480AA98D114326AB30D2

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

354.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. M. Eugene Sherman F.A.C.C.

Mailing Address 5110 S Hanover Way

City

Englewood

State

CO

Zip Code

80111-6239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aurora Denver Cardiology

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	0		2	0	1	5		

Transaction ID : A28443CEDA269CE45CF

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Lyle A. Siddoway F.A.C.C.Mailing Address 25 Monument Rd
Ste 200

City

York

State

PA

Zip Code

17403-5049

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wellspan Cardiology

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		2	6		2	0	1	5		

Transaction ID : 19267CED-ECE4-45E0-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Carmelindo Siqueira F.A.C.C.Mailing Address 9155 SW Barnes Rd
Ste 310

City

Portland

State

OR

Zip Code

97225-6630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence St. Vincent Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	5		

Transaction ID : C78B52C872D3F3C3331

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

3250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Felix O. Sogade MD, F.A.C.Mailing Address 639 Hemlock St
Ste 100

City	State	Zip Code
Macon	GA	31201-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2015

Transaction ID : 74CEBD7A-91D9-4E7C-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael J. Springer F.A.C.C.Mailing Address 803 Towner Pl
Ste 200

City	State	Zip Code
Louisville	KY	40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Norton Cardiovascular Associates

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	25	/	2015

Transaction ID : 49D1830ADF20E4829E69

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

C. Jesse W. St. Clair F.A.C.C.

Mailing Address 1632 Cutty Sark Rd

City	State	Zip Code
Virginia Beach	VA	23454-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : 5E9F9E15FB58FA929E9

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1041.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John S. Strobel F.A.C.C.

Mailing Address 3407 E Olcott Blvd

City

Bloomington

State

IN

Zip Code

47401-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Internal Medicine Associates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : F8415374D49E5406F98

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Suma A. Thomas F.A.C.C.Mailing Address 701 W Lakeside Ave
Apt 801

City

Cleveland

State

OH

Zip Code

44113-5517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.08

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 12 / 25 / 2015

Transaction ID : 427FBB4721F68CC43BD7

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. E. Murat Tuzcu F.A.C.C.Mailing Address 9500 Euclid Ave
Department of Cardiovascular Medic

City

Cleveland

State

OH

Zip Code

44195-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic J-2-3

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2015

Transaction ID : 6ED22B3E-8864-4A38-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1458.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark F. Victor F.A.C.C.Mailing Address 1114 Springmont Cir
8

City	State	Zip Code
Bryn Mawr	PA	19010-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : 9B353436CF748010349

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Juan Villafane F.A.C.C.Mailing Address 1400 Willow Ave
1205

City	State	Zip Code
Louisville	KY	40204-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

PEDIATRIC CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2015

Transaction ID : 4458AB9D09DB4B6C2333

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Robert N. Vincent CM, F.A.C.Mailing Address 2835 Brandywine Rd
Ste 300

City	State	Zip Code
Atlanta	GA	30341-5540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

PEDIATRIC CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : 27515187-BFEB-4F75-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

520.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thad F. Waites F.A.C.C.

Mailing Address 1017 Richburg Rd

City

Hattiesburg

State

MS

Zip Code

39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2015

Transaction ID : 4278A0648074C6A3797A

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. Steven S. Walker F.A.C.C.

Mailing Address 1926 Collingswood Rd

City

Columbus

State

OH

Zip Code

43221-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbus Cardiology Consultants Inc

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : 2404DE6E3C9E57ACAE9

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Diane E. Wallis F.A.C.C.

Mailing Address 6840 Main St
Ste 202

City

Downers Grove

State

IL

Zip Code

60516-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advocate Medical Group Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2015

Transaction ID : 7EC8BB1C-B3E5-45E4-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1708.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Howard T. Walpole MBA, F.A.C

Mailing Address 2581 Bridgewater Cir

City

Gainesville

State

GA

Zip Code

30506-1857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeast Georgia Health System

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1458.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			27			2015			

Transaction ID : 4E40BBAD9A689022E58E

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Howard T. Walpole MBA, F.A.C

Mailing Address 2581 Bridgewater Cir

City

Gainesville

State

GA

Zip Code

30506-1857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeast Georgia Health System

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1458.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Transaction ID : 4CD8A760B85B00B5ABF5

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Mary Norine Walsh F.A.C.C.

Mailing Address 428 W 83rd PI

City

Indianapolis

State

IN

Zip Code

46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Vincent Heart Center of Indiana

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2015			

Transaction ID : 4D3091CAA10664B9ABFC

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

266.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bruce A. Watt F.A.C.C.

Mailing Address 221 E 21st St

City

Sioux Falls

State

SD

Zip Code

57105-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Central Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 08 / 2015

Transaction ID : 44ABB9B5A8DFF97BF0BA

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Andrew R. Waxler F.A.C.C.

Mailing Address 2605 Keiser Blvd

City

Wyomissing

State

PA

Zip Code

19610-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berks Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : 99406C2E-3FF5-4BCF-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Daniel E. Westerdahl

Mailing Address 114 N Doheny Dr
Apt 103

City

West Hollywood

State

CA

Zip Code

90048-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars-Sinai Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.66

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2015

Transaction ID : 40AEB8582748393CEB94

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. B. Hadley Wilson MDMailing Address 1001 Blythe Blvd
Ste 300

City	State	Zip Code
Charlotte	NC	28203-5863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanger Clinic, PA

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

Transaction ID : 4DA5A5B96E309E3EC03A

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Vidya B. Yalamanchi F.A.C.C.

Mailing Address 404 Grand Oak Ln

City	State	Zip Code
Hazard	KY	41701-9430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : CD35517DAB8A44614AC

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Loran Yehudai F.A.C.C.Mailing Address 700 NE 87th Ave
Ste 210

City	State	Zip Code
Vancouver	WA	98664-1913

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Vancouver Clinic

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2015

Transaction ID : 59A067DA-3BB7-4D75-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1590.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 57

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Maja Zaric F.A.C.C.

Mailing Address 595 Main St

City
New YorkState
NYZip Code
10044-0047FEC ID number of contributing
federal political committee.

C

Name of Employer

Lenox Hill Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2015			

Transaction ID : 59C3F2FA8DDF9CD99BF

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City
CarmelState
INZip Code
46032-9688FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : 224711BE-AC33-4DB2-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City
CarmelState
INZip Code
46032-9688FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2015			

Transaction ID : 3AAE0F1E-6AFA-4917-

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

565.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 57
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

12 / 11 / 2015

Transaction ID : 42B58C7B-D21A-447C-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

12 / 11 / 2015

Transaction ID : 6BB40615-A7B7-451E-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

12 / 11 / 2015

Transaction ID : 75362412-2285-43FC-

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	1		2	0	1	5		

Transaction ID : 8B84037B-1CBA-4DE7-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	1		2	0	1	5		

Transaction ID : B33C8B4D-5BEE-41A9-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		1	1		2	0	1	5		

Transaction ID : CA6A0BDA-F455-4435-

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 48 OF 57
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : CF4D6C6F-AD1F-42D2-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : D27B3B09-0512-46E0-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : E355D308-EC44-4453-

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City

Carmel

State

IN

Zip Code

46032-9688

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University - Purdue University

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

12 / 11 / 2015

Transaction ID : E8700932-FFFA-4037-

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

37232.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 57

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City State Zip Code
 Richmond VA 23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11309.53

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 11 2015

Transaction ID : 8FEAF55D8B40205B217

Amount of Each Receipt this Period

650.13

Reimbursement for November 2015 Amex Fees and
December 2015 Merchant Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.13

650.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 57

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072-3852
Purpose of Disbursement
December 2015 Amex Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 31 2015
Transaction ID : VFBA3A812A62E8905722

Amount of Each Disbursement this Period

207.37

Full Name (Last, First, Middle Initial)

B. Wells Fargo, N.A.Mailing Address C/O Nova Information Systems
7300 Chapman Hwy
City State Zip Code
Knoxville TN 37920
Purpose of Disbursement
December 2015 Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 02 2015
Transaction ID : M98F099695E196B77DCB

Amount of Each Disbursement this Period

552.84

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

760.21

760.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bluegrass Committee

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Bluegrass CommitteeCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 17C36EA752BD8F9E7D8

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Dr. Raul Ruiz for Congress

Mailing Address PO Box 3433

City Palm Desert	State CA	Zip Code 92261
---------------------	-------------	-------------------

Purpose of Disbursement
2016 Primary

011

Candidate Name

Raul RuizCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : DDE4171072C119A2956

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Healthcare Freedom Fund

Mailing Address PO Box 2485

City Springfield	State VA	Zip Code 22152
---------------------	-------------	-------------------

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Healthcare Freedom FundCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 628DDE2DE30246DD3F9

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. IMPACTMailing Address 192 Lexington Ave.
Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
2015 Contribution

Candidate Name

IMPACTOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 2A1E7862B7EDE2A1327

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Johnson for Congress

Mailing Address PO Box 906

City Marietta State OH Zip Code 45750

Purpose of Disbursement
2016 Primary

Candidate Name

William L. JohnsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) **Contribution**

State: OH District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : 8D15D55605DB81A67C6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Majority Committee PAC--Mc PAC

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
2015 Contribution

Candidate Name

Majority Committee PAC--Mc PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : EB01A878F68D4A637A3

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

8500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Martha Roby for Congress

Mailing Address PO Box 195

City	State	Zip Code
Montgomery	AL	36101

Purpose of Disbursement
2016 Primary

011

Candidate Name

Martha RobyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : 6DD07F8558C653DA69A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Matsui for Congress

Mailing Address PO Box 1738

City	State	Zip Code
Sacramento	CA	95812

Purpose of Disbursement
2016 Primary

011

Candidate Name

Doris O. MatsuiCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : 719A857CB06CD50DF35

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. New Pioneers PAC

Mailing Address 228 S Washington St Ste 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2015 Contribution

011

Candidate Name

New Pioneers PACCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2015
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : C0251DD574CD10A96C5

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAC To the Future

Mailing Address 700 13th Street, NW, Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
2015 Contribution

Candidate Name

PAC To the Future

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 2FC075E88F9AE4FC95C

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Pioneer Political Action CommitteeMailing Address 701 8th Street, NW
Suite 500

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement
2015 Contribution

Candidate Name

Pioneer Political Action Committee

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 460822B2AC006A101EB

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Prosperity Action Inc.

Mailing Address 320 1st Street SE

City	State	Zip Code
Washington	DC	22314-2000

Purpose of Disbursement
2015 Contribution

Candidate Name

Prosperity Action Inc.

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2015

Transaction ID : 2202BFA224479626F0D

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Cardiology Political Action Committee

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has several small rectangular protrusions along its length. The bottom beam has several small rectangular protrusions along its length. The vertical supports are represented by short vertical lines connecting the top and bottom beams.

1000.00

38000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas P. Zipes M.A.C.C.

Mailing Address 10614 Winterwood

City	State	Zip Code
Carmel	IN	46032-9688

Purpose of Disbursement
Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : CA5133AB390AB86D661

Amount of Each Disbursement this Period

1100.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

1100.00
